			_				
Fill in this	information to identify your case:				irected in this form and	in Form	
Debtor 1	Fraida Weiss		122A-1S	upp:			
Debtor 2 (Spouse, if fil	ingl		■ 1. 7	here is no pres	umption of abuse		
(Spouse, II III	•			he calculation t	o determine if a presur	notion of abuse	
United Sta	Southern District Plains Division	of New York, White		applies will be m	nade under <i>Chapter 7 l</i> l cial Form 122A-2).	•	
Case num	ber 7:18-bk-22083		☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.				
				·	n amended filing		
Officia	l Form 122A - 1				· ·		
Chapt	er 7 Statement of Your Cu	rrent Monthl	y Incom	е		12/15	
a separate s number (if I military ser Part 1:	elete and accurate as possible. If two married people sheet to this form. Include the line number to which t known). If you believe that you are exempted from a price, complete and file Statement of Exemption from Calculate Your Current Monthly Income	the additional information presumption of abuse be Presumption of Abuse U	n applies. On the cause you do no	top of any addit	ional pages, write your o consumer debts or beca	name and case ause of qualifying	
_	t is your marital and filing status? Check one or	nly.					
	ot married. Fill out Column A, lines 2-11.						
□м	arried and your spouse is filing with you. Fill o	ut both Columns A and	B, lines 2-11.				
□м	arried and your spouse is NOT filing with you.	You and your spouse	are:				
	Living in the same household and are not lega	ally separated. Fill out	both Columns A	A and B, lines 2-	11.		
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are le apart for reasons that do not include evading the	gally separated under n	onbankruptcy la	w that applies or			
101(10A 6 month	e average monthly income that you received from al). For example, if you are filing on September 15, the 6-rs, add the income for all 6 months and divide the total by same rental property, put the income from that property	month period would be Ma 6. Fill in the result. Do no	rch 1 through Aug include any inco	just 31. If the amo me amount more t	unt of your monthly incom han once. For example, it	ne varied during the	
			Colui Debt		Column B Debtor 2 or non-filing spouse		
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions). 				2,820.00	\$		
	ony and maintenance payments. Do not include mn B is filled in.	payments from a spou	se if \$	0.00	\$		
of yo from room	mounts from any source which are regularly particles of your dependents, including child support an unmarried partner, members of your household, mates. Include regular contributions from a spous of include payments you listed on line 3	. Include regular contril	outions	0.00	\$		
5. Net i	ncome from operating a business, profession,						
		Debtor 1					
	s receipts (before all deductions)	\$ 0.00					
	nary and necessary operating expenses	-\$ <u>0.00</u> rm \$ 0.00 Cop	, horo - ¢	0.00	¢		
	nonthly income from a business, profession, or fa	m \$Cop	y here -> \$	0.00	\$		
6. Net i	ncome from rental and other real property	Debtor 1					
Groo	e receints (hefore all deductions)	\$ 0.00					
	s receipts (before all deductions) nary and necessary operating expenses	-\$ 0.00					
	nonthly income from rental or other real property	\$ 0.00 Cop	y here -> \$	0.00	\$		
	est. dividends. and royalties	·	\$ <u> </u>	0.00	\$		

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7. Interest, dividends, and royalties

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Debtor 1 Weiss, Fraida Case number (if known) 7:18-bk-22083

				Column A		Column B			
				Debtor 1		Debtor 2 or non-filing spouse			
8.	Unemployment compensation			\$	0.00	\$			
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a bene	fit under the						
	For you \$		0.00						
	For your spouse \$								
	Pension or retirement income. Do not include any amo under the Social Security Act.			\$	0.00	\$			
10.	Income from all other sources not listed above. Specinot include any benefits received under the Social Securit a victim of a war crime, a crime against humanity, or interior in the recessary, list other sources on a separate page and put	y Act or payments in ational or domestion the total below.	received as	\$	0.00	\$			
	•			\$	0.00	<u> </u>			
	Total amounts from separate pages, if any.			φ	0.00	\$ \$			
				Ψ	0.00	\$			
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column		\$	2,820.00	+ \$	Total current monthly			
Part	2: Determine Whether the Means Test Applies to	You				income			
12. Calculate your current monthly income for the year. Follow these steps:									
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 h	sere=> \$ 2,820.00			
	Multiply by 12 (the number of months in a year)					x 12			
12b. The result is your annual income for this part of the form						12b. \$ 33,840.00			
13.	Calculate the median family income that applies to y	ou. Follow these st	eps:						
	Fill in the state in which you live.	NY							
	Fill in the number of people in your household.	5							
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of	***************************************	specified i	n the separat	e instructi	13. \$ 104,927.00			
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office.									
14.	How do the lines compare?								
	Line 12b is less than or equal to line 13. On the top of page 1, check box 1 <i>T,here is no presumption of abuse.</i> Go to Part 3.								
14b. Line 12b is more than line 13. On the top of page 1, check box 2\(\mathcal{I}\) he presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.									
Part	3: Sign Below								
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.									
X /s/ Fraida Weiss									
Fraida Weiss									
Signature of Debtor 1									
Date February 12, 2018 MM / DD / YYYY									
	If you checked line 14a, do NOT fill out or file Form	122A-2.							
	If you checked line 14b, fill out Form 122A-2 and file it with this form.								

Official Form 122A-1